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House Bill 342

By: Representatives Hembree of the 67th, Knox of the 24th, Casas of the 103rd, Watson of the 91st, and Jackson of the 161st

A BILL TO BE ENTITLED AN ACT

- 1 To amend Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated,
- 2 relating to general provisions relative to insurance, so as to provide for direct billing of
- anatomic pathology services; to provide for related matters; to repeal conflicting laws; and
- 4 for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

6 SECTION 1.

- 7 Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to
- 8 general provisions relative to health, is amended by adding a new Code section to read as
- 9 follows:

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- 10 "33-24-27.3.
- 11 (a) As used in this Code section, the term 'anatomic pathology services' means:
- 12 (1) Histopathology or surgical pathology meaning the gross and microscopic
- examination and histologic processing of organ tissue performed by a physician or under
- the supervision of a physician;
- 15 (2) Cytopathology meaning the examination of cells from fluids, aspirates, washings,
- brushings, or smears, including the Pap test examination, performed by a physician or
- under the supervision of a physician;
- 18 (3) Hematology meaning the microscopic evaluation of bone marrow aspirates and
- biopsies performed by a physician or under the supervision of a physician and peripheral
- blood smears when the attending or treating physician or technologist requests that a
- blood smear be reviewed by a pathologist;
- 22 (4) Subcellular pathology and molecular pathology; and
- 23 (5) Blood-banking services performed by pathologists.
- 24 (b) A clinical laboratory or physician located in this state or in another state providing
- anatomic pathology services for patients in this state shall present or cause to be presented
- a claim, bill, or demand for payment for such services only to one or more of the following:

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- 1 (1) The patient directly;
- 2 (2) The responsible insurer or third-party payor;
- 3 (3) The hospital, public health clinic, or nonprofit health clinic ordering such services;
- 4 (4) The referring laboratory, other than a laboratory of a physician's office or group
- 5 practice; or
- 6 (5) The governmental agencies or their specified public or private agent, agency, or
- 7 organization on behalf of the recipient of the services.
- 8 (c) Except as provided under subsection (f) of this Code section, no licensed practitioner
- 9 in the state shall, directly or indirectly, charge, bill, or otherwise solicit payment for
- anatomic pathology services unless such services were rendered by the licensed practitioner
- or under the licensed practitioner's direct supervision in accordance with Section 353 of
- the Public Health Service Act (42 U.S.C. Section 263a).
- 13 (d) No patient, insurer, third-party payor, hospital, public health clinic, or nonprofit health
- 14 clinic shall be required to reimburse any licensed practitioner for charges or claims
- submitted in violation of this Code section.
- 16 (e) Nothing in this Code section shall be construed to mandate the assignment of benefits
- for anatomic pathology services as defined in this Code section.
- 18 (f) The provisions of this Code section shall not prohibit billing of a referring laboratory,
- other than a laboratory of a physician's office or group practice, for anatomic pathology
- services in instances where a sample or samples must be sent to another specialist.
- 21 (g) The respective state licensing boards having jurisdiction over any practitioner who may
- request or provide anatomic pathology services may revoke, suspend, or deny renewal of
- 23 the license of any practitioner who violates the provisions of this Code section."

SECTION 2.

25 All laws and parts of laws in conflict with this Act are repealed.